



AIDS RESOURCE CENTER
OF WISCONSIN

LEADING WISCONSIN'S RESPONSE TO AIDS

***Testimony of Mike Gifford, ARCW Executive Vice President
and Chief Operating Officer, in Support of SB 647***

Chairman Carpenter, members of the Committee,

Thank you for the opportunity to testify in support of SB 647. My name is Mike Gifford and I am the Executive Vice President & Chief Operating Officer of the AIDS Resource Center of Wisconsin.

- SB 647 assures access to urgently needed medical care for the more than 7,000 HIV patients in Wisconsin - medical care that is without a doubt the difference between a long and healthy life or disease progression and death.
- Importantly, within the current state fiscal climate, SB 647 assures this life saving access to medical care with no new GPR funding.

SB 647 creates another Medicaid hospital supplemental payment in Wisconsin state statutes. A payment to a hospital to coordinate and provide hospital and specialty care. This new Medicaid supplemental payment is a combination of State funds from the Mike Johnson Life Care Grant drawing down matching federal Medicaid funding. Federal funds that will otherwise go unused.

While the bill as drafted is not specific to the amount of the supplemental payment, ARCW strongly supports an amendment to SB 647 to limit the supplemental payment to \$1 million – approximately \$300,000 in state GPR from the Mike Johnson grant matched by \$700,000 in federal Medicaid funding.

Access to Care. The ARCW Medical Center is the largest provider of HIV care in Wisconsin with more than 1,200 HIV patients turning to us for medical, dental and mental health care. The importance of SB 647 is illustrated in part by the 20% of ARCW's patients who do not have access to specialty care services.

HIV patients need access to specialty medical care as they face a wide variety of health concerns much sooner in life than people with healthy immune systems. The health care supported by SB 647 has emerged as the second most important type of care for HIV patients, next to only advancements in HIV medications.

The 17th Conference on Retroviruses and Opportunistic Infections held last month is our country's leading HIV medical care conference. The resounding outcome of this conference was the need for specialty care for HIV patients who are facing at much higher rates and earlier in life - liver, heart and kidney ailments; neurologic problems;

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and the need for treatment many types of cancer – including cervical cancer a disease that strikes HIV positive women at a rate 5 times greater than HIV negative women.

Unfortunately, 20% of ARCW's patients do not have access to specialty care services.

Health Care Disparities. HIV is unfortunately an issue of health care disparity. More than 52% of new HIV infections are among African-Americans although they represent just 12% of our population. 13% of new HIV infections are among Hispanic/Latinos while they represent just 5% of the population.

We see this everyday at the ARCW Medical Center where 70% of our patients are people of color. Yet these are the same people who do not have access to specialty care services.

DHS's Wisconsin State Health Plan calls for an end of health care disparities and this legislation allows us to help accomplish this goal in the fight against HIV by assuring access to care for everyone with HIV regardless of their racial or ethnic background.

Upper Payment Limit. A concern raised about SB 647 is that it may exceed the Wisconsin Medicaid Upper Payment Limit. We are pleased that the Department of Health Services has strenuously researched this and concluded time and again that SB 647 will not result in the upper payment limit being exceeded. In fact if this bill and the Critical Access Hospital legislation are both passed by the legislature, more than \$6 million remains available under Wisconsin's UPL. We have relied on Wisconsin's experts – DHS – to make this determination and are heartened that they have identified these available funds. Their expertise on this issue is clearly demonstrated by the fact that Wisconsin has never exceeded its UPL.

SB 647 maximizes HIV/AIDS funding in Wisconsin – with no new GPR funding. Passage of SB 647 is vital assuring access to health care for HIV/AIDS patients and the fight against AIDS. It brings \$700,000 in HIV funding into Wisconsin, at no cost, instead of leaving those dollars in the coffers of the federal Medicaid program.

We urge you to support and adopt SB 647 and I would be happy to respond to any questions you have.